APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/797,457 03/10/2004 Carl Geisler 18130 US 4459 TITLE OF INVENTION: NON-MAGNETIC, HERMETICALLY-SEALED MICRO DEVICE PACKAGE 66/26/2607 URSFAUZ 086609087 231959 19797457 81 FC:1581 1408.00 DA 1470 Inc. PILING DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE DATE DUE PREV. FAIS SAGE FEE TOTA B. FREE (ShOULE DATE DUE DATE DATE DUE DATE DATE DUE DATE DATE DATE DATE DATE DATE DATE DAT	OIPE	1'	PART I	B - FEE(S) TRANSM	MITTAL		
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APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. FÂIDÚSSÉGÉ FEE TOTAB FEE (ÑDUE DATE DUE nonprovisional NO \$1400 \$300 \$0 \$1700 06/25/2007 EXAMINER ART UNIT CLASS-SUBCLASS PERKINS, PAMELA E 2822 438-126000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. 'Fee Address' indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE M/A-Com, Inc. Lowell, MA	IIILE OF INVENTION:	NON-MAGNETIC, H	ERMETICALLT-SEAL	ED MICKO DEVICE FA	01 FC:15	01 1400.00 DA	231950 10797457
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PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Lowell, MA Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) I a Acheck is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 3.11. (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
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Date June 20, 2007 Authorized Signature _ Registration No. 41, 467 Typed or printed name BRIAN C.

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